

UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No.:	TC00042 C01	
	First Inventor:	Bernhard Weisshaar et al.	
	Title:	SERVICE FRAMEWORK SUPPORTING REMOTE SERVICE DISCOVERY AND CONNECTION	
	Express Mail Label No.:	EV439330689US	

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS (see MPEP chapter 600 concerning utility patent application contents)		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231	
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form in duplicate (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification Total Pages 66 (preferred arrangement set forth below)</p> <p>-Descriptive title of the invention</p> <p>-Cross Reference to Related Applications</p> <p>-Statement Regarding Fed sponsored R&D</p> <p>-Reference to sequence listing, a table,</p> <p>-Background of the Invention</p> <p>-Brief Summary of the Invention</p> <p>-Brief Description of the Drawings (if filed)</p> <p>-Detailed Description</p> <p>-Claim(s)</p> <p>-Abstract of the Disclosure</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Form (CFR)</p> <p>b. <input type="checkbox"/> Specification Sequence Listing on:</p> <p>i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies);</p> <p>ii. <input type="checkbox"/> or paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p>	
ACCOMPANYING APPLICATION PARTS			
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) <input type="checkbox"/> Power of Attorney Statement (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> IDS <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input checked="" type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other: _____</p>			
<p>6. <input type="checkbox"/> Application Data Sheet under 37 CFR 1.76</p> <p>18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:</p> <p><input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in- Part (CIP) Prior Appl. No. 09/662,439</p> <p>Prior Appl. information: Examiner: Dmitry Levitan Group/Art Unit: 2662</p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>			

19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		23330		or	<input type="checkbox"/> Correspondence address below
Name	Kevin D. Wills				
Address	Motorola, Inc. – Law Department 3102 North 56 th Street				
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Name	Kevin D. Wills		Registration No.	43,993	
SIGNATURE	<i>Kevin D. Wills</i>		Date	March 9, 2004	

**FEE
TRANSMITTAL**

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT **(\$ 938.00)**

FEE TRANSMITTAL		<i>Complete if Known</i>	
		Application Number	
		Filing Date	
		First Named Inventor	Bernhard Weisshaar
		Examiner Name	
		Group Art Unit	
Attorney Docket No.		TC00042 C01	

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:

Deposit Account Number

502117

Deposit Account Name

Motorola, Inc.

Charge Any Additional Fee required under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit Card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Paid
101	770	201	370	Utility filing fee
106	330	206	165	Design filing fee
107	510	207	255	Plant filing fee
108	740	208	370	Reissue filing fee
114	160	214	80	Provisional filing fee
SUBTOTAL (1)				(\$ 770.00)

2. EXTRA CLAIM FEES

Total Claims	Previously Paid*		X	Fee from below	Fee Paid
	18	20			
Independent Claims	5	3	= 2	X 84	= 168.00
Multiple Dependent				280	= 0
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	
103	18	203	9	Claims in excess of 20	
102	84	202	42	Independent claims in excess of 3	
104	280	204	140	Multiple dependent claim, if not paid	
109	84	209	42	* Reissue independent claims over original patent	
110	18	210	9	*Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)				(\$ 168.00)	

**OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.

*For Reissues, see above

SUBMITTED BY

Name (Print/Type) **Kevin D. Wills**

Complete if applicable

Registration No.	43,993	Telephone	602-952-4399
Signature	<i>Kevin D. Wills</i>	Date	March 9, 2004